New Jersey Department of Health and Senior Services

New Jersey Department of Environmental Protection

Worker and Community Right to Know Act EMPLOYER OUTREACH SURVEY

Name of Employer	Tel	Telephone No.			NJEIN NUMBER								
1 1,1		-1											
Street Address, City, State, Zip Code													
						SIC Co	ode		Co	/Mun	Code	;	
Contact Person	Title												
Heign Name / Local Number						NΙΛ	100.0						
Union Name/Local Number						INA	ICS C	ode					
Union Representative					<u> </u>								
								_					
Union Address Telephone Number					Total Number of Exposed Employees								
Union Address	Tel	Telephone Number				Employees Exposed Employees							
_													
Contact	Dates					Туре	of Bu	ısines	ss Cond	ucted	at Th	is Site	
Method: Method:		N /	ethod:		<u> </u>								
Phone Phone	_	IV	Phone	_									
			_										
☐ In Person ☐ In Pe	erson		In Pe	rson									
☐ Mail ☐ Mail			Mail										
Comments													
Review of Forms and Materials	Em	ployer H	as? Ne		leeds?		Number		Sent? Det			S 4	
With Employer	Yes	No	N/A	Yes	No	ı	Need	ed	Yes		Date S	sent	
RTK Survey													
RTK Regulations - DHSS													
RTK Hazardous Substance List													
Hazardous Substance Fact Sheets-English													
Hazardous Substance Fact Sheets-Spanish													
RTK Brochures-English													
RTK Brochures-Spanish													
RTK Posters-English													
RTK Posters-Spanish													
Other													
Name of County Representative (Print)			Signatu	ro of Co	ounty Do	nroco	ntativ						
Name of County Representative (Fiffit)			Signatu	1 6 01 00	Julity RE	hiese	ıııalıv	.					
County Lead Agency			i .			Date							
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Distribution: White - NJDHSS

Canary-County Lead Agency Pink-NJDEP